

OCA												
2012-00287												
Date / Time Reported						S	M	T	W	T	F	S
Month		Day		Yr		Time						
08		22		2012		14:00		Hrs				
Last Known Secure						S	M	T	W	T	F	S
Month		Day		Yr		Time						
08		22		2012		14:00		Hrs				
s. 08 22 2012						Offense Tract						
dan NC 27027						Z1						
NGLE						Victim Residence Type						
						<input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family						

How Attacked or Committed	Forcible <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input checked="" type="checkbox"/> No	Weapon / Tools Not Applicable / None
Sex Acts/BY DOWNLOADING CHILD PORN		

# of Victims <i>1</i>	Type <input type="checkbox"/> Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown					Injury <input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major					Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
V1	Victim/Business Name (Last, First, Middle) <i>STATE OF NORTH CAROLINA</i>					Victim of Crime # <i>1,</i>	DOB / Age	Race	Sex	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown	
Home Address <i>101 NORTH 3RD AVENUE , Mayodan, NC 27027</i>									Home Phone <i>336-548-6038</i>			
Employer Name/Address							Business Phone		Mobile Phone			
VYR	Make	Model	Style	Color	Lic/Lis		Vin					

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)										
Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input checked="" type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown										
Code	Name (Last, First, Middle)						Victim of Crime #	DOB / Age	Race	Sex
RP	BRIDGE, ROBERT								W	M
Home Address								Home Phone		
Employer Name/Address							Business Phone		Mobile Phone	
Reidsville Police Department, 220 West Morehead Street, Reidsville, Nc 27320							336-347-2349			
Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown										
Code	Name (Last, First, Middle)						Victim of Crime #	DOB / Age	Race	Sex
Home Address								Home Phone		
Employer Name/Address							Business Phone		Mobile Phone	

L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found
(Check "OJ" column if recovered for other jurisdiction)

[illegible]

Number of Vehicles Stolen	0	Number Vehicles Recovered	0
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Officer <i>BRIM, C. T. (374)</i>	ID#	Officer Signature	Supervisor Signature <i>BARKER, R. D. (375)</i>
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Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed/Cleared <input type="checkbox"/> Closed/Leads Exhausted	Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate <input checked="" type="checkbox"/> Cleared by Arrest by Another Agency <input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined
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